

**Health Insurance Premium Rates (Monthly)**

8/1/2020 – 7/31/2021

Carrier		Employee Only	Employee + One	Family	
<b>Medical Insurance</b>					
<b>Kaiser Permanente HMO</b>	<b>Premium</b>	710.17	1633.4	1917.47	2.10% Increase
	County Paid Portion – FT	710.17	1633.40	1917.47	2.10% Increase
	Employee Paid Portion – FT	0.00	0.00	0.00	No Change
	County Paid Portion – PT .5	355.09	816.70	958.74	
	Employee Paid Portion – PT .5	355.09	816.70	958.74	
	County Paid Portion – PT .6	426.10	980.04	1150.48	
	Employee Paid Portion – PT .6	284.07	653.36	766.99	
	County Paid Portion – PT .7	497.12	1143.38	1342.23	
	Employee Paid Portion – PT .7	213.05	490.02	575.24	
	County Paid Portion – PT .75	532.63	1225.05	1438.10	
	Employee Paid Portion – PT .75	177.54	408.35	479.37	
	County Paid Portion – PT .8	568.14	1306.72	1533.98	
	Employee Paid Portion – PT .8	142.03	326.68	383.49	
	County Paid Portion – PT .9	639.15	1470.06	1725.72	
	Employee Paid Portion – PT .9	71.02	163.34	191.75	
<b>Kaiser Permanente Added Choice POS</b>		805.12	1851.61	2173.9	2.02% Increase
	County Paid Portion – FT	792.25	1822.01	2139.15	2.02% Increase
	Employee Paid Portion – FT	12.87	29.60	34.75	2% Increase
	County Paid Portion – PT .5	396.12	911.00	1069.57	
	Employee Paid Portion – PT .5	409.00	940.61	1104.33	
	County Paid Portion – PT .6	475.35	1093.20	1283.49	
	Employee Paid Portion – PT .6	329.77	758.41	890.41	
	County Paid Portion – PT .75	594.18	1366.50	1604.36	
	Employee Paid Portion – PT .75	210.94	485.11	569.54	
	County Paid Portion – PT .9	713.02	1639.81	1925.23	
	Employee Paid Portion – PT .9	92.10	211.80	248.67	
<b>Kaiser Permanente HSA *</b>		494.69	1137.78	1335.65	2.0% Increase
	County Paid Portion – FT	494.69	1137.78	1335.65	2.0% Increase
	Employee Paid Portion – FT	0.00	0.00	0.00	No change
	County Paid Portion – PT .6	296.81	682.67	801.39	
	Employee Paid Portion – PT .6	197.88	455.11	534.26	
	County Paid Portion – PT .75	371.02	853.34	1001.74	
	Employee Paid Portion – PT .75	123.67	284.45	333.91	
	County Paid Portion – PT .9	445.22	1024.00	1202.09	
	Employee Paid Portion – PT .9	49.47	113.78	133.57	

FT = Full Time FTE; PT = Part Time with indicated % FTE

\*The County also contributes \$1500/\$3000 into HSA for employee at beginning of plan year

Carrier	Employee Only	Employee + One	Family	
<b>Dental Insurance</b>				
<b>Kaiser Permanente w/Ortho</b>	76.24	175.36	205.84	5% Increase
County Paid Portion – FT	76.24	175.36	205.84	
Employee Paid Portion – FT	0.00	0.00	0.00	
County Paid Portion – PT .5	38.12	87.68	102.92	
Employee Paid Portion – PT .5	38.12	87.68	102.92	
County Paid Portion – PT .6	45.74	105.22	123.50	
Employee Paid Portion – PT .6	30.50	70.14	82.34	
County Paid Portion – PT .9	68.62	157.82	185.26	
Employee Paid Portion – PT .9	7.62	17.54	20.58	
<b>Principal Dental PPO w/Ortho</b>	60.85	121.94	202.11	0% Increase
County Paid Portion – FT	60.85	121.94	202.11	
Employee Paid Portion – FT	0.00	0.00	0.00	
County Paid Portion – PT .5	30.43	60.97	101.06	
Employee Paid Portion – PT .5	30.43	60.97	101.06	
County Paid Portion – PT .6	36.51	73.16	121.27	
Employee Paid Portion – PT .6	24.34	48.78	80.85	
County Paid Portion – PT .7	42.60	85.36	141.48	
Employee Paid Portion – PT .7	18.26	36.58	60.63	
County Paid Portion – PT .8	48.68	97.55	161.69	
Employee Paid Portion – PT .8	12.17	24.39	40.42	
County Paid Portion – PT .9	54.77	109.75	181.90	
Employee Paid Portion – PT .9	6.09	12.19	20.21	
<b>Willamette Dental w/Ortho</b>	55.75	96.75	167.65	3% Increase
County Paid Portion – FT	55.75	96.75	167.65	
Employee Paid Portion – FT	0.00	0.00	0.00	
County Paid Portion – PT .7	39.03	67.73	117.36	
Employee Paid Portion – PT .7	16.73	29.03	50.30	
County Paid Portion – PT .85	47.39	82.24	142.50	
Employee Paid Portion – PT .85	8.36	14.51	25.15	
County Paid Portion – PT .75	41.81	72.56	125.74	
Employee Paid Portion – PT .75	13.94	24.19	41.91	
<b>Life Insurance</b>				
	General/1442	Road/697	FOPPO	
Premium	5.87	7.19	5.87	
County Paid Portion – FT	5.87	7.19	5.87	
Employee Paid Portion – FT	0.00	0.00	0.00	
County Paid Portion – PT .6	3.52	4.31	3.52	
Employee Paid Portion – PT .6	2.35	2.88	2.35	
County Paid Portion – PT .8	4.70	5.75	4.70	
Employee Paid Portion – PT .8	1.17	1.44	1.17	
County Paid Portion – PT .9	5.28	6.47	5.28	
Employee Paid Portion – PT .9	0.59	0.72	0.59	

FT = Full Time FTE; PT = Part Time with indicated % FTE

Note: The figures above may change or may be different for different employee groups.